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Form 990

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public.

▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

OMB No 1545-0047 2014 Open to Public Inspection

A I	For the 2014 o	alendar year, or tax year beginning, and ending			
ВС	theck if applicable	C Name of organization		D Employer iden	tification number
-	Address change	LAW AND JUSTICE INSTITUTE			
\equiv	-	Doing business as		20-248	7980
Ш,	lame change	Number and street (or P O box if mail is not delivered to street address)	Room/suite	E Telephone num	ber
ا 🗍	nitial return	1000 REGENT UNIVERSITY DRIVE	RH-422	757-22	<u>6-2749</u>
	inal return/	City or town, state or province, country, and ZIP or foreign postal code			
LJ te	erminated	VIRGINIA BEACH VA 23464		G Gross receipts \$	846,884
_	mended return	F Name and address of principal officer		C Cross regerpts c	
	Application pending		H(a) is this a gr	oup retum for subords	nates? Yes X No
ш,	ppiloddori perioling		1//63 401		Yes No
			1	pordinates included?	
			, סאריוו	" attach a list (see ii	nstructions)
<u>ı</u> .	Tax-exempt status	X 501(c)(3) 501(c) () ◀ (insert no) 4947(a)(1) or 527			
J 1	Website > N	/A	H(c) Group exe	emption number	
<u>к</u>	Form of organization	X Corporation Trust Association Other ▶ L Y	ear of formation 2	005 м :	State of legal domicile DC
** ****		mmary			
	-	scribe the organization's mission or most significant activities	ari Boliciam	TONAT	
8		ROMOTE RELIGIOUS AND CONSTITUTIONAL FREEDOMS THROUG	GH EDUCAT	TONAL	
a l	SEMI	NARS AND RESEARCH			
ᇤ					
ZUIJ Activities & Governance	2 Check th	s box Fig. if the organization discontinued its operations or disposed of more than 25	5% of its net as	sets	
ق		of voting members of the governing body (Part VI, line 1a)		3 4	
∞ ∞				4 4	
اقبی		if independent voting members of the governing body (Part VI, line 1b)			
5∑	5 Total nui	iber of individuals employed in calendar year 2014 (Part V, line 2a)		5 0	
75	6 Total nui	ber of volunteers (estimate if necessary)		6 0	
= `	7a Total uni	elated business revenue from Part VIII, column (C), line 12	 ,	7a	0
~ວ		ated business taxable income from Form 990-T, line 34 RECEIVED	1	7b	C
	D IVEC GIME		Prior Ye		Current Year
ر	8 Contribu	ons and grants (Part VIII, line 1h) service revenue (Part VIII, line 2g) nt income (Part VIII, column (A), lines 3, 4, and 7d)	أمرا 65	4,145	846,884
⊃ કુ		ons and grants (Part VIII, line 1h) Sepurce revenue (Part VIII, line 2n)	71		0
○ 등	_	service revenue (r art vini, into 2g)	} 		
<u>╙</u> ᇶ╽	10 Investme	nt income (Part VIII, column (A), lines 3, 4, and 7d)	<u> </u>		0
<u>چ</u> ا	11 Other re	enue (Part VIII, column (A), lines 5, 4, and 70, and 11e PGDEN, UT	<u> </u>		0
SCANNED UC	12 Total rev	enue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	d 65	4,145	846,884
\mathcal{S}		nd similar amounts paid (Part IX, column (A), lines 1-3)			4,000
'		paid to or for members (Part IX, column (A), line 4)			0
		other compensation, employee benefits (Part IX, column (A), lines 5–10)		-	O
Expenses					0
ű.		nal fundraising fees (Part IX, column (A), line 11e)			
ğ	b Total fun	draising expenses (Part IX, column (D), line 25) ▶ 0			
Ü	17 Other ex	enses (Part IX, column (A), lines 11a-11d, 11f-24e)	65	2,223	837,457
	18 Total exi	enses Add lines 13–17 (must equal Part IX, column (A), line 25)	65	2,223	841,457
		less expenses Subtract line 18 from line 12		1,922	5,427
<u> </u>	13 Nevenue	less expenses Subtract line 10 north line 12	Beginning of Cu		End of Year
Assets or d Balances	20 Total acc	ets (Part X, line 16)		681	27,943
SSe		•		5,375	
뒱		lities (Part X, line 26)			27,210
Ž.		s or fund balances Subtract line 21 from line 20		4,694	733
_P:	art II Si	gnature Block			
Ur	nder penalties of	perjury, I declare that I have examined this return, including accompanying schedules and statement	ents, and to the b	est of my knowle	dge and belief, it is
tru	e, correct, and o	emplete Declaration of preparer (other than officer) is based on all information of which preparer I	has any knowled	ge .	-
		Var. alex Setrular		9-	10-15
Δ		70070000	-	Date	/ • / / /
Sig		gnature of office		Date	
Hei	re .	Jay Alan Sekulaw Mesdent			
		ype or print name/and title			
	Print/Typ	preparer's name Preparer's signature	Date	Check	if PTIN
Paid	TAMPO	B. MURPHY James & Merry	// 109/09	1/15 self-employe	D P00847588
	narer UALIES	. ATIMIANIA A TINITAMANI ANIIA	77		46-1517562
•	Finnsn			Firm's EIN	#0-T2T/207
use	Only	6525 THE CORNERS PKWY STE 116		_	
	Firm's ad	NORCROSS, GAV 30092-3349		Phone no 7'	70-448-252 <u>!</u>
Mav		s this return with the preparer shown above? (see instructions)			Yes No
		action Act Notice, see the separate instructions.			Form 990 (2014
DAA	. sportfork iteu	and the transplace and debatate mendensite.		M	.21
				90	~1
				U	

orm 990 (2014)	LAW AND JUSTICE	NSTITUTE	20-2487980	Page 2
	Statement of Program Serv	ice Accomplishments a response or note to any line	in this Part III	X
1 Briefly desc	ribe the organization's mission	a response of note to any line	in this rait in	
SEE SCH	EDULE O			
•	anization undertake any significant 990 or 990-EZ?	program services during the year which	were not listed on the	Yes X No
•	scribe these new services on Scher	dule O		
•	anization cease conducting, or mak	e significant changes in how it conduct	s, any program	Yes X No
services? If "Yes." des	scribe these changes on Schedule			Tes A NO
	_		gest program services, as measured by	
-	Section 501(c)(3) and 501(c)(4) orgo penses, and revenue, if any, for eac	•	ount of grants and allocations to others,	
la (Code) (Expenses \$ 82	23,514 including grants of \$	4,000) (Revenue \$	
PROVIDE	THE SERVICES OF	DISTINGUISHED INDIV	IDUALS TO PARTICIPAT	
	·		AGE IN MEDIA AND OUT! SUES PROMOTING RELIG	
			E AS OFFICER AND DIR	
			ZATIONS AND PROVIDE	
DISTING	UISHED PROFESSOR	OF LAW AND GOVERNME	NT AT REGENT UNIVERS	ITY.
4b (Code) (Expenses \$	including grants of \$) (Revenue \$)
4c (Code) (Expenses \$	including grants of \$) (Revenue \$)
•				
4d Other progr	am services (Describe in Schedule	O.)		
(Expenses		uding grants of \$) (Revenue \$)
4e Total progra	am service expenses >	823,514	-	Form 990 (2014)
~ `				rum JJU (2014)

<u> </u>	it IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			••
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			37
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,	_		х
_	Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			x
_	"Yes," complete Schedule D, Part I	6	_	Λ_
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	7		x
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	'		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	8		x
9	complete Schedule D, Part III Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
3	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		x
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	1.5		
• •	VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
_	complete Schedule D, Part VI	11a		X
ь	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
-	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		Х
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if			
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	_16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			₹.
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			v
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			v
	If "Yes," complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		
_ <u>_</u> _	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or 21 X 21 domestic government on Part IX, column (A), line 17 If "Yes," complete Schedule I, Parts I and II Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on X 22 Part IX, column (A), line 27 If "Yes," complete Schedule I, Parts I and III Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the 23 organization's current and former officers, directors, trustees, key employees, and highest compensated X 23 employees? If "Yes," complete Schedule J 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b X 24a through 24d and complete Schedule K If "No," go to line 25a 24b b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit X 25a transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? X 25b If "Yes," complete Schedule L, Part I 26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or X disqualified persons? If "Yes," complete Schedule L, Part II 26 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled X 27 entity or family member of any of these persons? If "Yes," complete Schedule L, Part III Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions) X A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete X 28b Schedule L, Part IV c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) X was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV 28c X 29 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified X 30 conservation contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, 31 X 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," 32 X 32 complete Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 X 33 sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, X or IV. and Part V. line 1 34 X 35a 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable X related organization? If "Yes," complete Schedule R, Part V, line 2 36 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, 37 X Part VI Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and

19? Note. All Form 990 filers are required to complete Schedule O

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Form 990 (2014)

Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 1			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and	4.	v	
_	reportable gaming (gambling) winnings to prize winners?	1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a	⊢ "		
þ	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
2-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	3a		x
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3b		
b 42	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O At any time during the calendar year, did the organization have an interest in, or a signature or other authority	100		
4a	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	Ì		
	account)?	4a		x
h	If "Yes," enter the name of the foreign country	100		
U	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts			
	(FBAR)			
52	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	Ì	x
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	1-33-		
- U	organization solicit any contributions that were not tax deductible as charitable contributions?	6a	1	x
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
_	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a	L	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was		ŀ	
	required to file Form 8282?	7с		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	_		
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	79	ļ	X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		X
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	_		
	sponsoring organization have excess business holdings at any time during the year?	8		ļ
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a	 -	
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
a	Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
_ b		\dashv		
11	Section 501(c)(12) organizations. Enter Gross income from members or shareholders			
a	Gross income from other sources (Do not net amounts due or paid to other sources			
b	against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	120		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
a	Is the organization licensed to issue qualified health plans in more than one state?	13a	†	
a	Note. See the instructions for additional information the organization must report on Schedule O	1		
ь	Enter the amount of reserves the organization is required to maintain by the states in which			
_	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand		L	
14a		14a		X
h	A MUNICIPAL DE LA CONTRACTOR DE LA CONTR	14b		

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Part VI

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI

Sec	tion A. Governing Body and Management			
000	LION A. COVERINING BODY and management		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 4			
	If there are material differences in voting rights among members of the governing body, or	1		
	if the governing body delegated broad authority to an executive committee or similar			
	committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 4			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	1		
	any other officer, director, trustee, or key employee?	2	X	
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a_	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at	ļ.,		
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
<u>Sec</u>	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Co	de)	_	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
þ	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	<u> </u>	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this was done	12c	<u>X</u>	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	40.		v
	with a taxable entity during the year?	16a		X
D	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the	465		
500	organization's exempt status with respect to such arrangements?	16b		
17 18	List the states with which a copy of this Form 990 is required to be filed DC, VA Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)			
	available for public inspection. Indicate how you made these available. Check all that apply			
	Own website Another's website W Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and			
	financial statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	OCKREEPER 6525 THE CORNERS PARKWAY, SUITE 116			
		_44	ຊຸ ລ	52E

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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order individual trustees or directors, institutional trustees, officers; key employees, highest compensated employees, and former such persons

K Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (list any hours for	box	k, unle icer ar	(C) Position not check more than one unless person is both an er and a director/trustee)				(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2 1888 MISS)	organization and related organizations
(1) JAY A SEKULOW	0.00									
PRESIDENT/DIRECTOR	3.00 0.00	x		x				o	o	o
(2) STUART J. ROTH	0.00	^		^	\vdash	+-		<u> </u>		
	3.00				1				_	
SECRETARY/TREASURER	0.00	X	╙	X	<u> </u>	ļ_		0	0	0
(3) BISHOP HAROLD R		ļ								
	1.00							o	o	0
DIRECTOR COUENCY	0.00	X	├	-	┝	-		U.		<u> </u>
(4) ROBERT SCHENCK	1.00									
DIRECTOR	0.00	x						0	o	0
(5)	0.00	1 <u>~</u>	╁	_	\vdash	╁				
(0)										
(6)										
(7)				-	 				-	
(0)				_		<u> </u>	_			
(8)										
(9)		-								
(10)		-	-							
(11)		-	-	ļ			_			
•	1									
DAA			L			Т.	Ц_		<u> </u>	Form 990 (2014)

Part	(A) Name and title	(B) Average hours per week (list any hours for	(C) Position (do not check more than one box, unless person is both a officer and a director/trustee						(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization			
		related organizations below dotted line)	Individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)		and	inizatio I relate nizatio	:d	
(12)														
(13)														
(14)														
(15)														
(16)														
(17)												-		
(18)														
(19)														
c .	Sub-total Total from continuation she Total (add lines 1b and 1c) Total number of individuals (in					ie lis	ted a	b	ve) who received more than	\$100,000 of				_
	reportable compensation from	the organization	<u> </u>	0								7	es N	No
4	employee on line 1a? If "Yes," For any individual listed on lin organization and related orgal	complete Sche e 1a, is the sum	dule of re	J for	suc able	h ind	dividi ipens	ual satı	ion and other compensation	from the	3			<u>X</u>
5	individual Did any person listed on line 1 for services rendered to the o	rganization? If "\								r ındıvıdual				<u>x</u> <u>x</u>
1 1	on B. Independent Contractor Complete this table for your fire compensation from the organ	ve highest comp	ensa omp	ited ensa	inde	pend for t	dent o	con aler	ntractors that received more indar year ending with or with	than \$100,000 of on the organization's tax ye	ear		<u> </u>	
		(A) business address							Descrip	(B) tion of services		Com	(C) censation	
	VOCACY SERVICES, : RGINIA BEACH		. 2	34			7 C		TERVILLE TP, SHB INSTR/MEDIA/RI				500,0	200
EDI	UCATIONAL RESOURCE	S ASSOCIA				22	3R	p	STREET CONSULTING/INS				125,0	
								-						
2	Total number of independent	contractors (incl	uding	but	not	lımıt	ed to	the	ose listed above) who					
DAA	received more than \$100,000	or compensatio	n froi	m th	e org	anız	ation	1 🏲	·	2	L	Form	990 (2	2014)

Pa	rt VI	Check if Schedule		itains a	response o	or note to any line	in this Part VIII		
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
इइ	1a	Federated campaigns	1a						
irar oun		Membership dues	1b						
S, E		Fundraising events	1c						
a iii		Related organizations	1d						
S, C		Government grants (contributions)	1e						
Pion	f	All other contributions, gifts, grants,							
텵		and similar amounts not included above	1f		846,884				
Contributions, Gifts, Grants and Other Similar Amounts	_	Noncash contributions included in lines 1	a-1f	\$					
<u> </u>	h	Total. Add lines 1a-1f			•	846,884			
Program Service Revenue	٥.				Busn Code				
Š	2a								
e e	b								
<u>Ş</u>	c d								
ε	e								
gra	_	All other program service rev	enue						
P		Total. Add lines 2a-2f	01100						
	3	Investment income (including	dıvıder	nds, intere	est,				
		and other similar amounts)	,		▶				
	4	Income from investment of ta	ıx-exem	pt bond p	roceeds 🕨			<u>.</u>	·
	5	Royalties			•				
		(ı) Reai		(n) F	Personal				
	6a	Gross rents							
	b	Less rental exps							
	С	Rental inc or (loss)							
	d 7a	Net rental income or (loss) Gross amount from	_	T	<u> </u>				
	, u	sales of assets (i) Securities	es	(11)) Other				
		other than inventory		1					
	b	Less cost or other							
	_	basis & sales exps		 					
	c d	Gain or (loss) Net gain or (loss)		1	•				
		Gross income from fundraising ev	ents						
Other Revenue	Ua	(not including \$	CITES						
ve		of contributions reported on line 1	c)						
Ã.		See Part IV, line 18	a						
the	ь	Less direct expenses	b						
Ö		Net income or (loss) from fur	ndraisin	events	•				
	9a	Gross income from gaming activity	ies	- 	-				
		See Part IV, line 19	а						
	b	Less direct expenses	b						
	С	Net income or (loss) from ga	ming ac	tivities					
	10a	Gross sales of inventory, les	S	ļ					
		returns and allowances	а						
		Less cost of goods sold	þ						
	<u> </u>	Net income or (loss) from sa		ventory	<u> </u>				
		Miscellaneous Revenu	9		Busn. Code				
	11a								
	b				-				
	٦ د	All other revenue							
	l d e	Total. Add lines 11a–11d							
	12	Total revenue. See instructi	ons		•	846,884	0	0	0
	 -								

Form 990 (2014)

Part IX Statement of Functional Expenses

Secti	on 501(c)(3) and 501(c)(4) organizations must c Check if Schedule O contains a resp			plete column (A)	
Do n	ot include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
7b, 8	b, 9b, and 10b of Part VIII.	rotal expenses	expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments See Part IV, line 21		·····		
2	Grants and other assistance to domestic	4 000	4 000		
	individuals See Part IV, line 22	4,000	4,000		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
7	persons described in section 4958(c)(3)(B)	-	··		
7 8	Other salaries and wages Pension plan accruals and contributions (include				
o	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	-	 		
10	Payroll taxes				<u>. </u>
11	Fees for services (non-employees)				
a	Management				
b	Legal	2,745		2,745	
c	Accounting	5,250		5,250	
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties		<u></u>		
16	Occupancy				
17	Travel	23,677	23,677		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				·
19	Conferences, conventions, and meetings	170,587	170,587		
20	Interest				
21	Payments to affiliates			-	· · · · · · · · · · · · · · · · · · ·
22	Depreciation, depletion, and amortization				
23	Insurance				······································
24	Other expenses Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e 1f				
	line 24e amount exceeds 10% of line 25, column				
_	(A) amount, list line 24e expenses on Schedule O) CONTRACTUAL SERVICES -	634,047	625,250	8,797	
a	BANK CHARGES	1,151	023,230	1,151	·····
D	CAPARIT AFIRE	1,151		<u> </u>	
c d					
a e	All other expenses				-
25	Total functional expenses. Add lines 1 through 24e	841,457	823,514	17,943	0
26	Joint costs. Complete this line only if the	3.27.207			<u>_</u>
_•	organization reported in column (B) joint costs				
	from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if				
	following SOP 98-2 (ASC 958-720)				
DAA	M 1,,				Form 990 (2014)

Balance Sheet Part X Check if Schedule O contains a response or note to any line in this Part X (B) (A) Beginning of year End of year 27,943 681 Cash-non-interest bearing 2 2 Savings and temporary cash investments 3 3 Pledges and grants receivable, net 4 4 Accounts receivable, net 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees 5 Complete Part II of Schedule L 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L 6 7 Notes and loans receivable, net 7 8 8 Inventories for sale or use 9 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or 10a other basis Complete Part VI of Schedule D 10c b Less accumulated depreciation 10b 11 Investments—publicly traded securities 11 12 12 Investments—other securities See Part IV, line 11 13 13 Investments—program-related See Part IV, line 11 14 14 Intangible assets 15 15 Other assets See Part IV, line 11 681 27,943 16 16 Total assets. Add lines 1 through 15 (must equal line 34) 5,375 16,793 17 17 Accounts payable and accrued expenses 18 18 Grants payable 10,417 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities 21 21 Escrow or custodial account liability Complete Part IV of Schedule D Loans and other payables to current and former officers, directors. trustees, key employees, highest compensated employees, and 22 disqualified persons Complete Part II of Schedule L 23 23 Secured mortgages and notes payable to unrelated third parties 24 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X 25 of Schedule D 5,375 27,210 Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117 (ASC 958), check here ▶ Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. -4,694 733 27 Unrestricted net assets 28 28 Temporarily restricted net assets 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here ▶ complete lines 30 through 34. 30 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 32 Retained earnings, endowment, accumulated income, or other funds 694 33 Total net assets or fund balances 681 27,943 34 Total liabilities and net assets/fund balances

Form	1990 (2014) LAW AND JUSTICE INSTITUTE 20	0-2487980			Pa	ge 12
Pa	rt XI Reconciliation of Net Assets					
	 Check if Schedule O contains a response or note to any line in this Par 	t XI				
1	Total revenue (must equal Part VIII, column (A), line 12)		1			884
2	Total expenses (must equal Part IX, column (A), line 25)		2	<u>8</u>		457
3	Revenue less expenses Subtract line 2 from line 1		3			427
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))		4		-4,	694
5	Net unrealized gains (losses) on investments		5			
6	Donated services and use of facilities		6			
7	Investment expenses		7			
8	Prior period adjustments		8			
9	Other changes in net assets or fund balances (explain in Schedule O)		9			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X	, line				
	33, column (B))		10			<u>733</u>
Pa	at XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Par	t XII				┵
					Yes	No
1	Accounting method used to prepare the Form 990	Other		_		
	If the organization changed its method of accounting from a prior year or checked "Other,"	explain in				
	Schedule O					
2a	Were the organization's financial statements compiled or reviewed by an independent acc	ountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were	compiled or				
	reviewed on a separate basis, consolidated basis, or both					
	Separate basis Consolidated basis Both consolidated and separate t	pasis				
b	Were the organization's financial statements audited by an independent accountant?			2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were	audited on a				
	separate basis, consolidated basis, or both					
	Separate basis Consolidated basis Both consolidated and separate t					
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsible	lity for oversight				
	of the audit, review, or compilation of its financial statements and selection of an independent	dent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax	year, explain in				
	Schedule O					
3a	As a result of a federal award, was the organization required to undergo an audit or audits	as set forth in				
	the Single Audit Act and OMB Circular A-133?			3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did r					
	required audit or audits, explain why in Schedule O and describe any steps taken to under	go such audits		3b_		<u> </u>
				For	ա 990	0 (2014)

SCHEDULE A (Form 990 or 990-EZ) Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Employer identification number

LAW AND JUSTICE INSTITUTE 20-2487980 Reason for Public Charity Status (All organizations must complete this part) See instructions Part I The organization is not a private foundation because it is (For lines 1 through 11, check only one box) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 |X| An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) 8 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions-subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. b Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. d | Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization Enter the number of supported organizations Provide the following information about the supported organization(s) (ii) EIN (iv) Is the organization (v) Amount of monetary (vi) Amount of (iii) Type of organization (i) Name of supported listed in your governing other support (see (described on lines 1-9 support (see organization above or IRC section document? instructions) instructions) (see instructions)) Yes No (A) (B) (C) (D) (E)

Page 2

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support						
	dar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	908,718	791,532	747,662	654,145	846,884	3,948,941
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	908,718	791,532	747,662	654,145	846,884	3,948,941
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						3,948,941
	tion B. Total Support						
Caler	ndar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7	Amounts from line 4	908,718	791,532	747,662	654,145	846,884	3,948,941
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on	:				-	
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
11	Total support. Add lines 7 through 10						3,948,941
12	Gross receipts from related activities, etc	(see instructions)				12	
13	First five years. If the Form 990 is for the	organization's first	t, second, third, for	urth, or fifth tax yea	ir as a section 501	(c)(3)	
	organization, check this box and stop her						<u> </u>
Sec	tion C. Computation of Public Su						
14	Public support percentage for 2014 (line 6	, column (f) divided	d by line 11, colum	ın (f))		14	100.00%
15	Public support percentage from 2013 Sch					15	100.00%
16a	33 1/3% support test—2014. If the organ				33 1/3% or more, c	heck this	▶ 👽
	box and stop here. The organization qual	•					▶ X
Ь	33 1/3% support test—2013. If the organ				5 is 33 1/3% or mi	ore,	▶ □
	check this box and stop here. The organic				465	44	
17a	10%-facts-and-circumstances test—201						
	10% or more, and if the organization meet						
	Part VI how the organization meets the "fa organization						▶ □
b	10%-facts-and-circumstances test—20						
	15 is 10% or more, and if the organization						
	Explain in Part VI how the organization me supported organization						▶ 🗌
18	Private foundation. If the organization di instructions	d not check a box	on line 13, 16a, 16	b, 17a, or 17b, che	ck this box and se	ee	▶ 🗌

Page 3

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II If the organization fails to qualify under the tests listed below, please complete Part II.)

6	tion A. Dublic Cumpert	quality direct to	ne teete neteu i	sciott, picaco c	ompioto i airii	·/		
	tion A. Public Support dar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	T 7	f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual	(a) 2010	(b) 2011	(6) 2012	(u) 2013	(6) 2514		i) rotai
	grants ")					<u> </u>	-	
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose							
3	Gross receipts from activities that are not an unrelated trade or business under section 513							
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
5	The value of services or facilities furnished by a governmental unit to the organization without charge							
6	Total. Add lines 1 through 5						_	
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons							
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year							
С	Add lines 7a and 7b							
8	Public support (Subtract line 7c from line 6)							
	tion B. Total Support							
Caler	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9	Amounts from line 6				<u> </u>	· · · · · · · · · · · · · · · · · · ·		
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources							
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975							
С	Add lines 10a and 10b							
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carned on							
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)			}		<u> </u>		
13	Total support. (Add lines 9, 10c, 11, and 12)							
14	First five years. If the Form 990 is for the organization, check this box and stop her		st, second, third, fo	ourth, or fifth tax ye	ar as a section 50	1(c)(3)		▶ [
Sec	tion C. Computation of Public Su	ipport Percer	tage					
15	Public support percentage for 2014 (line 8	, column (f) divide	ed by line 13, colur	nn (f))	•	1	5	%
16	Public support percentage from 2013 Sch				··		6	%
<u>Sec</u>	tion D. Computation of Investme					. 		
17	Investment income percentage for 2014 (i	ine 10c, column (f	f) divided by line 1:	3, column (f))		_1		%
18	Investment income percentage from 2013						8	%
19a	33 1/3% support tests—2014. If the orga							<u>.</u> —
	17 is not more than 33 1/3%, check this b							▶ [_
b	33 1/3% support tests—2013. If the orga							▶ □
	line 18 is not more than 33 1/3%, check the							
<u>20</u>	Private foundation. If the organization di	o not check a box	on line 14, 19a, 0	I Jab, CUECK TUIS D	ox and see instruc	แบกร		

Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A

and B If you	checked 11b of Part I, complete	Sections A and C. If you checked	11c of Part I, complete
Sections A, I	D, and E If you checked 11d of P	Part I, complete Sections A and D,	and complete Part V.)
Section A. All Supportin	g Organizations		

•••	on the transfer of the second			
1	Are all of the organization's supported organizations listed by name in the organization's governing		Yes	No
	documents? If "No," describe in Part VI how the supported organizations are designated. If designated by			
	class or purpose, describe the designation. If historic and continuing relationship, explain	1		
2	Did the organization have any supported organization that does not have an IRS determination of status			
	under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported			
	organization was described in section 509(a)(1) or (2)	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer			
	(b) and (c) below	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and			
	satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the			
	organization made the determination	3b		
C	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)			
	(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use	3c]	
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If			
	"Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign			
	supported organization? If "Yes," describe in Part VI how the organization had such control and discretion			
	despite being controlled or supervised by or in connection with its supported organizations	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination			
	under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used			
	to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)			
	purposes	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"			
	answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN			
	numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action,			
	(III) the authority under the organization's organizing document authorizing such action, and (iv) how the action			
	was accomplished (such as by amendment to the organizing document)	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already			
	designated in the organization's organizing document?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to			
	anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class			
	benefited by one or more of its supported organizations; or (c) other supporting organizations that also			
	support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in			
	Part VI.	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial			
	contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent			
	controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990)	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?			
	If "Yes," complete Part I of Schedule L (Form 990)	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more			
	disqualified persons as defined in section 4946 (other than foundation managers and organizations described			
	in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which			
	the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b		
С	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit			
	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c		
0a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f)			
	(regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting			
	organizations)? If "Yes," answer (b) below	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to			,
	determine whether the arganization had excess hisiness holdings)	l 10h l		ı

Schedule A	Form	990 or	990-EZ1	2014
CONCUMENT A		JJV 01	~~~~	FO 1-

2b

3a

activities but for the organization's involvement

Parent of Supported Organizations. Answer (a) and (b) below.

trustees of each of the supported organizations? Provide details in Part VI.

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard

Schedule A (Form 990 or 990-EZ) 2014 LAW AND JUSTICE INSTITU		20-246	7980 Page
Part V Type III Non-Functionally Integrated 509(a)(3) Supporting			
1 Check here if the organization satisfied the Integral Part Test as a qualifying trus			.11
other Type III non-functionally integrated supporting organizations must complet	e Sections A thre	ough E	,
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		_
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		<u></u>
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year)			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other			
factors (explain in detail in Part VI)			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,			
see instructions)	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by 035	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions)	6		
7 Check here if the current year is the organization's first as a non-functionally-inte	egrated Type III s	supporting organization	(see

Schedule A (Form 990 or 990-EZ) 2014

instructions)

Schedule A (Form 990 or 990-EZ) 2014

and 4c

Breakdown of line 7

d Excess from 2013 e Excess from 2014

Excess distributions carryover to 2015. Add lines 3j

Schedule A (Form 990 or 990-EZ) 2014 LAW AND JUSTICE INSTITUTE

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Part VI Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, and Part III, line 12 Also complete this part for any additional information (See instructions.)

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

2014

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or 990-EZ.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization

LAW AND JUSTICE INSTITUTE

Employer identification number 20-2487980

FORM 990 - ORGANIZATION'S MISSION

TO PROMOTE ACTIVITIES TO FURTHER RELIGIOUS LIBERTIES AND CONSTITUTIONAL FREEDOMS. ACTIVITIES INCLUDE PREPARATION AND PUBLICATION OF RESEARCH AND ANALYSIS REGARDING PUBLIC POLICY AND ISSUES REGARDING THESE PRINCIPLES. HOST AND PARTICIPATE IN EDUCATIONAL PRESENTATIONS, SYMPOSIA AND OTHER MEETINGS REGARDING RELIGIOUS LIBERTIES AND CONSTITUTIONAL FREEDOMS.

FORM 990, PART VI, LINE 2 - RELATED PARTY INFORMATION AMONG OFFICERS
JAY SEKULOW

JAY SEKULOW AND STUART ROTH HAVE A BUSINESS RELATIONSHIP WITH EACH OTHER.

STUART ROTH

JAY SEKULOW AND STUART ROTH HAVE A BUSINESS RELATIONSHIP WITH EACH OTHER.

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990
THE PRELIMINARY FORM 990 IS PRESENTED TO THE TREASURER OF THE ENTITY AND
ALSO TO EACH BOARD MEMBER AND OUTSIDE COUNSEL FOR REVIEW. ANY REQUIRED
CORRECTIONS ARE MADE TO FINALIZE THE RETURN BEFORE IT IS SUBMITTED FOR
SIGNATURE AND FILING.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY

THE BOARD AND PRESIDENT REVIEW ANNUALLY THE RESPONSES TO THE CONFLICT OF

INTEREST DISCLOSURE REQUESTS.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION

Schedule-O (Form 990 or 990-EZ) (2014)

Name of the organization

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THE ORGANIZATION WILL FURNISH COPIES OF ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS TO THE PUBLIC UPON WRITTEN REQUEST.